



MEMBERSHIP NOMINATION FORM

I the undersigned, desire to become a **Senior** **Family** **Crew** **Social** **Student/Junior**
Member of the Bellerive Yacht Club.

NAME (in full) _____
(Title) (Given names) (Surname)
Known as _____

PARTNERS NAME _____
(Title) (Given Names) (Surname)
(If applying for Family Membership)

Known as _____

Please complete details of partner and names and dates of birth of children overleaf (if applicable)

PRIVATE ADDRESS _____
Postcode _____

POSTAL ADDRESS _____
(if different from above) Postcode _____

TELEPHONE (HOME) _____ MOBILE PHONE: _____

TELEPHONE (BUSINESS) _____

DATE OF BIRTH _____ E-MAIL: _____

OCCUPATION/EMPLOYER _____

BUSINESS ADDRESS _____

OTHER CLUB MEMBERSHIPS _____

What would be your primary area of activity as a member? _____

Do you have any expertise, which you believe the club may benefit from? _____

NAME OF BOAT Owned, part-owned or leased by us (if applicable) _____
(A BYC Boat Registration form should accompany this application)

SIGNATURE OF APPLICANT(S) _____ Date _____

SIGNATURE OF APPLICANT(S) _____ Date _____

I hereby authorize you, in the event of being elected, to enter our names on the Register of Members, and agree to accept and be bound by the Rules and Regulations and By-Laws of the Club.

Name of Proposer: _____ Secondar: _____

DECLARATION BY PROPOSER & SECONDER

I nominate _____ as a member of the Bellerive Yacht Club. I have known him/her personally for _____ years, and from my own personal knowledge of his/her character, conduct, morals and habits, I consider him/her to be a fit and proper person(s) for membership.

SIGNATURE OF PROPOSER _____ Date _____

(Full Name in Block Letters) _____

I second the nomination of _____ as a member of the Bellerive Yacht Club. I have known him/her personally for _____ years, and from my own personal knowledge of his/her character, conduct, morals and habits, I consider him/her to be a fit and proper person(s) for membership.

SIGNATURE OF SECONDER _____ Date _____

(Full Name in Block Letters) _____

NOTE: Proposer and Seconder must both be Senior/Family Members of at least 12 months standing at the time of nomination.

Details of all immediate family members to be included in Family Membership

PARTNERS NAME _____

PRIVATE ADDRESS _____
_____ Postcode _____

POSTAL ADDRESS _____
(if different from above) _____ Postcode _____

TELEPHONE (HOME) _____ MOBILE PHONE: _____

TELEPHONE (BUSINESS) _____

DATE OF BIRTH _____ E-MAIL _____

Children's details (if applicable)

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____